

**ILLINOIS DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES  
PCCM QUALITY MANAGEMENT SUBCOMMITTEE**

**MEETING MINUTES FOR WEDNESDAY, OCTOBER 12, 2011**

**Attendees:**

Cari VonderHaar, RN	Quality Manager, AHS
Margaret Kirkegaard, MD	Medical Director, AHS
Amy Calvin, RN	QA Nurse, AHS
Mary Morrissey, RN	QA Nurse, AHS
Lena Wheat, RN	QA Nurse, AHS
Kathy Ingram, RN	QA Nurse, AHS
Anna Reich, RN	QA Nurse, AHS
Dr Nand, MD	Hospitalist, Chicago
Julie Garcia	VNA Health Center
Vicky Hosey	HFS
Kathy Moles	HFS
Wendie Medina	HFS
Sharon Pittman	HFS
Barb Hay	Family Health Network
Karen Osuch	Family Health Network
Megan Jordan	Meridian HP
Vicky Boyle	Meridain HP
Scott Allen	ICAAP
Ken Ryan	ISMS
Tim Meneely	Carle Clinic
Dr Dodda, MD	Family Practice
Dr Yabut, MD	Private Practice
Dr Wayne Franklin	Private Practice
Mike Temporal	SIHF
Stacey Lageman	SIHF
Vince Keenan	IAFP

Cari VonderHaar chaired the meeting and opened with a welcome and thank you to all for their participation in today's meeting.

BreastCancerScreeningTaskForceReport:

Dr Kirkegaard reported that she, along with three other physicians formed the task force. A review of current literature related to breast cancer screening recommendations was completed by those on the task force. Overall, the majority of the literature noted that for the 40 to 50 year old age group, the

current screening recommendations have been shown to decrease mortality. The task force findings are to make no change in screening recommendations at this time.

#### IHCMammographyOutreachPilots:

Cari reported that Illinois Health Connect recently conducted mammography outreach calls as part of pilot programs. These were conducted in Cook county with the Chicago Department of Public Health for 6,000 women in the Roseland and Austin communities due for a mammogram.

IHC also conducted similar outreach for approximately 400 women in the southern Illinois, who were also due for mammograms. Warm transfers during the calls to screening sites were completed when appropriate. Claims data will be analyzed after claim submission time period, and also compared to rates in control groups.

Dr Kirkegaard asked if there was any input on approaches used by sites to conduct mammography outreach. Dr Nand stated she would be interested in partnering with hospitals in the Austin community. Mike and Stacey from Southern Illinois Healthcare Foundation noted that their women's health clinics have better rates for breast cancer screening. They also reported that they work with overall increased awareness with both their staff and patients on importance of screening. Mike and Stacey also noted the barriers with transient populations. Reminders with electronic medical records may be of value. Mike did state that hospitals in the majority of their clinic areas send out yearly reminders to women once they have a mammogram done at that hospital facility.

#### IHCEDUUsePilots:

Cari reported that IHC has begun a pilot with call center staff to ask specific questions of enrollees regarding emergency department use. The responses are being tracked until 5,000 enrollees have been spoken with during inbound calls. IHC averages 50,000-80,000 calls per month.

Vicky Boyle asked what the goal of this pilot is. Dr Kirkegaard responded that this initial pilot phase is to gauge the receptiveness of enrollees to receive education on appropriate emergency department use. IHC has not set a percentage of reduction goal at this time.

#### TelevoxUpdate:

Dr Kirkegaard reported that the auto calling program conducted by Pfizer Pharmaceuticals, in conjunction with IHC, to remind families of immunizations due is underway. This program is called Televox. Vicky Boyle reported that Meridian has utilized this program as well in Michigan. She stated that they found Televox did not always supply accurate phone numbers or dates with reporting of those members contacted.

Barb Hay reported that Family Health Network has used Televox over the last three and one half years, and other than small issues, feels has helped their member immunization rates.

#### Fall2011ProviderProfiles-AdultAmbulatoryCareVisits:

Cari reported that the Fall 2011 set of Provider Profiles sent out to IHC providers include three new indicators related to ambulatory care visits. The three indicators are broken down by age groups of 20-44 years, 45-64 years, and 65 years and older. Further details can be found on the IHC website under Quality Tools within the profile summary chart.

With no further business, the meeting adjourned.

A "Save the Date" notice for the next PCCM QM Subcommittee meeting will be sent.